

Warren Recreation Department Field Permit

Date of Filing: _____

Name of Organization

Mailing Address

Contact Person

Telephone Number

E-Mail Address

Dates/Time Requested

Reason/Function

Before permit application is submitted,
the following documents must be
attached:

- Certificate of Insurance
- Schedules (games and practices)
- Rosters to determine outside fees
where applicable

Total Charges \$ _____

Permission Granted By:

Date: _____

I, the undersigned, have read the rules and regulations attached and shall be present
and assume personal responsibility for the field on the date(s) indicated.

Signature _____ Position _____

Hugh Cole Park

- ____ Lower Field
- ____ Upper Softball Field
- ____ Concession Stand
- ____ Bathrooms
- ____ Sand Volleyball Court
- ____ With Lights
- ____ Basketball Court
- ____ Shuffleboard Court
- ____ Bocce Court

Veteran's Field

- ____ Gate Field
- ____ Main Field
- ____ New Fields
- ____ Concessions
- ____ Bathrooms
- ____ Press Box

Jamiel's Park

- ____ Softball Field
- ____ Softball Field with Lights
- ____ Tennis Courts
- ____ Basketball Court
- ____ Hockey Rink
- ____ Bathrooms

Burr's Hill Park

- ____ Senior Baseball Field
- ____ Basketball Court
- ____ Tennis Courts
- ____ Bandshell